



CONFIDENTIAL VICTIM'S DECLARATION

I, _____ declare as follows:
(name)

I am the victim of the offense committed by _____
(name of inmate)
_____.
(CDCR number¹)

Pursuant to the provisions of Penal Code Section 3043, I am requesting notification of the parole hearing of the above-named inmate.

Please select either (a) or (b):

- a. I have no relationship with the inmate.
- b. My relationship to the inmate is _____.

_____ (Print or Type Name)	(The below information is used for security purposes and will remain confidential.)	
_____ (Address)	_____ (Driver's License Number)	_____ (State)
_____ (City/State/Zip Code)	_____ (Social Security Number)	
_____ (Primary Phone Number)	_____ (Date of Birth)	
_____ (Alternate Phone Number)	_____ (E-mail address)	

I declare under penalty of perjury that the above information is true and correct.

Executed on _____, at _____, _____.
(month/day/year) (city) (state)

(Signature)

¹ California Department of Corrections and Rehabilitation inmate number, if known.